

DIRECTORY LISTING / MAILING LABELS ORDER

1. Indicate the date the order form was completed. Provide your complete mailing address and telephone number, including area code.
2. Check the box for each item requested.
3. Fill in the amount due. (See the price chart on the back of this sheet.)
4. Make the check or money order (we can't accept cash) payable to: WI Division of Children and Family Services. **Payment must be**
5. Send the order form and payment to the appropriate address. Allow two (2) weeks for delivery.

DIRECTORY LISTINGS contain the name, address, telephone number, contact person, licensee, capacity, operating hours, and more. They are sorted by Facility Name.

DIRECTORY LABELS are sorted by ZIP CODE, are self-sticking, and include the name and mailing address of each facility.

Name - Requestor	Mailing Address	Telephone Number	Date Form Completed (mm/dd/yyyy)
------------------	-----------------	------------------	----------------------------------

ORDER - Check requested counties or Entire Region. Send order to appropriate address.

[illegible]

- ☐ Child Placing Agencies
- ☐ Day Care Centers (Group and Family)
- ☐ Family Day Care Centers
- ☐ Group Day Care Centers
- ☐ Group Foster Homes
- ☐ Residential Care Centers
- ☐ Shelter Care
- ☐ Day Camps

- ☐ E-mail directory formatted in Excel
- ☐ Paper directory
- ☐ E-mail labels formatted in Excel
- ☐ Printed labels

- ☐ E-mail directory formatted in Excel
- ☐ Paper directory
- ☐ E-mail labels formatted in Excel
- ☐ Printed labels

\$

DIRECTORY / LABEL PRICING INFORMATION

	FACILITY TYPE	E-MAIL DIRECTORY	PAPER DIRECTORY	E-MAIL LABELS	PRINTED LABELS	REQUESTED QUANTITY Directory / Labels	TOTAL
ENTIRE STATE	ALL DAY CARE GROUP only FAMILY only	\$50 \$25 \$25	\$65 \$30 \$30	\$65 \$35 \$35	\$80 \$50 \$50		\$
	Other Types	\$ 7	\$10	\$ 7	\$15		\$
ENTIRE REGION(S) (Price will not exceed Entire State pricing.) NOTE: Milwaukee and Dane counties are charged the same as Entire Region.	ALL DAY CARE GROUP only FAMILY only	\$15 \$10 \$10	\$25 \$15 \$15	\$20 \$15 \$15	\$30 \$25 \$25		\$
*COUNTY Requesting 1 - 8 counties NOTE: Milwaukee and Dane counties are charged the same as Entire Region. NOTE: Nine or more counties is same as Entire Region.	ALL DAY CARE GROUP only FAMILY only	\$ 7 \$ 7 \$ 7	\$20 \$10 \$10	\$ 7 \$ 7 \$ 7	\$25 \$20 \$20		\$
	Other Types	N / C		\$ 7	\$10		\$
CITY	ALL DAY CARE GROUP only FAMILY only	\$ 5 \$ 5 \$ 5	\$ 5 \$ 5 \$ 5	\$ 5 \$ 5 \$ 5	\$ 5 \$ 5 \$ 5		\$
TOTAL							\$

- *IF DIRECTORY DOES NOT EXCEED 15 PAGES, NO CHARGE WILL BE ASSESSED.

- PROVIDE E-MAIL ADDRESS IF YOU ARE REQUESTING AN ELECTRONIC COPY.

E-MAIL ADDRESS: _____